CITY OF HOUSTON

Solid Waste Management Department - Permit Office

Combustible Waste Storage Permit Application

	Application Type:	□ N	ew [Renev	wal	
Mailing Address of App	olicant					
		(Please Type	e or Print)			
Name of Business:						
Street/P.O. Box:						
City/State/Zip:						
Print name of person resp	oonsible as it should app	ear on the per	mit.			
Business Phone: (Ext	Emerge	ency No.: ()	Ext	
Business Fax: ()	Check here,	if you would lik	te to receive	your permit by fax.	
Service Address of App	licant					
Permit Address:						
City/Zip:						
Request Information						
Number of units at service	ce location:		Perm	it Fee \$		<u> </u>
FEES: One Dumpster (1) \$75.00 / Two (2) or more Dumpsters \$150.00 PAYMENT OPTIONS: Check/Money Order/Credit Card Original application and original notarized affidavit must be mailed in. Make payable to: City of Houston			Administrativ	ve Fee \$	5.00	
				Total \$		
Dept., Permit Section, P.O. l	and payment to: Solid Was Box 1562,	te Management				_
Houston, Tx. 77251 If paying by credit card, plea (Circle One) AmExp	FEES PAID WITH THIS APPLICATION ARE NOT REFUNDABLE					
Account #				F 6 4		
Exp. Date				For furthe	er information, call 7	13-857-9159
Signature						
I understand that the permit is granted or for any violati must be posted at the locati	ion of the City of Houston	Fire Codes and				
	Signature			/ Application	Date	
	<u>~</u>			• •		
(Office Use Only) SIT	E Approved 1	11		1		
	Input By					